

# Alcohol harm in Hawke's Bay

## Why it matters

# 29%

**of Hawke's Bay adults** (over 15 years) **are drinking at unsafe levels** compared with 21% nationally.<sup>1</sup>

Our high levels of harmful drinking both in New Zealand and Hawke's Bay are very concerning.

Percentage of adults with hazardous drinking patterns



**Alcohol is the leading risk factor for health loss** for 15-49 year olds in New Zealand.<sup>2</sup>

(Health loss is a measure that combines loss of quality and quantity of life)

### How much alcohol is safe?<sup>3</sup>

Alcohol causes breast, bowel, throat and stomach cancer and so there is no safe limit. In pregnancy too, there is no safe limit as alcohol causes damage to the fetus.



### How much does alcohol cost health services?

Health services in Hawke's Bay spend at least **\$3 million each year** treating alcohol-related admissions to hospital\*



\*2014/2015 figures. Based on the number of bed days for most alcohol related conditions. Does not include conditions where alcohol is a secondary factor nor GP visits, outpatients or rehabilitation costs.



"The impact of alcohol-related presentations to the [emergency] department cannot be overstated.

**98%** of emergency staff have **experienced verbal abuse...**

**92%** had **physical threats or physical harm** against them.

**88%** of emergency staff described their **patients' care being negatively affected** by alcohol-related presentations."

— Dr Scott Boyes | Specialist Emergency Physician, Hawke's Bay Emergency Department

## Top five alcohol-related admissions

to Hawke's Bay Fallen Soldiers' Memorial Hospital<sup>4</sup>

1	Head injury	
2	Upper limb injury	
3	Overdose/alcohol poisoning	
4	Lower limb injury	
5	Collapse/fall	

Alcohol-related admissions to emergency mental health services sit within the top 10.



## MYTH

**"The problem is a small minority of drinkers."**

**Fact:**



**1 in 4 adults** and **1 in 2 young men\*** in New Zealand who drink alcohol identified as being hazardous drinkers.<sup>5</sup>

\*aged (15-29 years)

Out of all recreational drugs **alcohol causes the most harm to the most people** (including people who do not drink)<sup>6</sup>



## Opposing alcohol licences – what is Hawke's Bay District Health Board's position?



The Sale and Supply of Alcohol Act 2012 requires the Medical Officer of Health to review applications and report the findings to the District Licensing Committee on all *on*-licences (drinking at bar or restaurant), *off*-licences (buy and take off site) and *club licences*, and *specials* (events requiring a licence) at its discretion.

**When making a decision on whether to oppose a licence application, Hawke's Bay District Health Board considers:**

1. the potential for harm to health and the community
2. whether there is enough evidence of that alcohol-related harm
3. similar previous successful legal decisions (case law precedents) that support our position.

**Because of the greater risk of harm, we particularly focus on:**

- new off-licences in areas of high deprivation
- special licences for events involving children, especially those held on school grounds.

## Off-licences in areas of high deprivation – what's the evidence of increased harm?

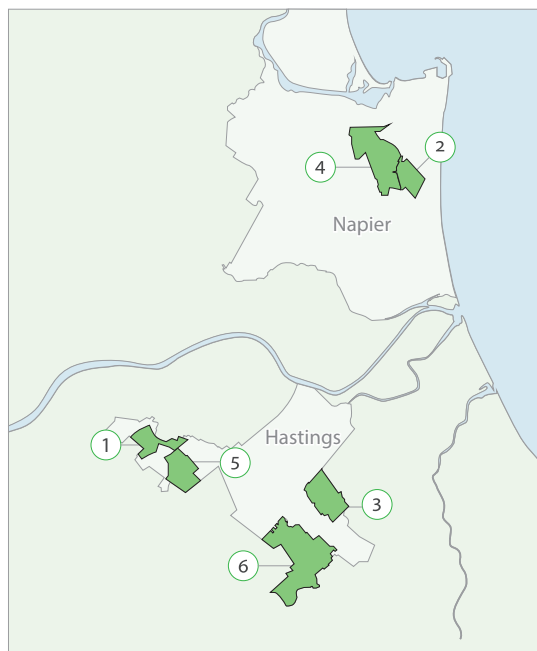
We know that some communities in Hawke's Bay are especially burdened by alcohol-related harm.

**Research shows alcohol outlet density is associated with heavy drinking, anxiety, depression and suicide.<sup>7</sup>**

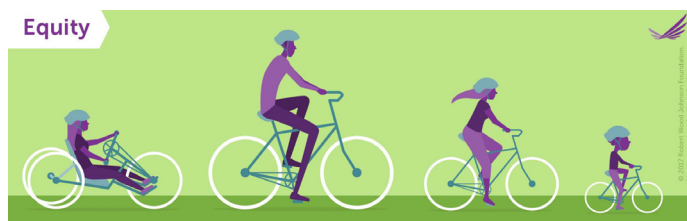
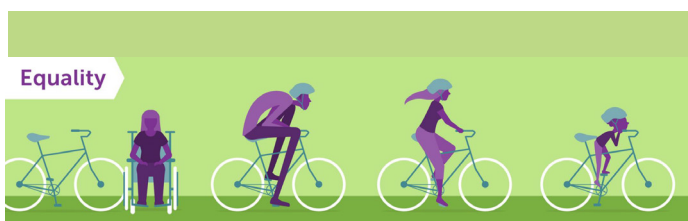


## Top suburbs for alcohol-related presentations to the emergency department (in order)<sup>8</sup>

- ① Flaxmere West
- ② Maraenui
- ③ Mayfair
- ④ Onekawa South
- ⑤ Flaxmere East
- ⑥ Akina



A recent study shows that living in a neighbourhood with **one or more alcohol outlets** is associated with a **16% increase in the likelihood of people developing alcohol-related problems.**<sup>7</sup>



## What is health inequity?

Health inequity means differences in health that are unfair and that we can change. Examples of health inequities in alcohol-related harm:

- There are more alcohol outlets located in more deprived communities than in less deprived communities<sup>9</sup>
- Māori are more likely to die from alcohol-related illness or injury than non-Māori despite drinking alcohol less often than non-Māori men and women<sup>10</sup>

A Hawke's Bay District Health Board community survey (2016)<sup>11</sup> found that **60%** of respondents identified **bottle stores** as having the **most impact** on alcohol-related harm in communities.

**56%** of respondents **wanted fewer bottle stores.**



"I know the harmful effects it had on my whānau and community members and friends.

**If [availability] was limited... that would make a difference."**



— Minnie Ratima | Community Advocate

## MYTH

### “Education and personal responsibility is the key”

#### Fact:

These two measures alone are not enough. Changing **environmental** factors like availability, cost and advertising are much more effective, as the Law Commission found in 2010.<sup>14</sup> This was the most comprehensive, evidenced based review ever done of New Zealand alcohol laws and what needs to change.

A Hawke's Bay DHB community survey (2016) found that

# 78%

of respondents **wanted more alcohol-free entertainment** in their community<sup>12</sup>



“Almost all the very heavily dependent young alcoholics have started [drinking] in their teens.

Because alcohol is normalised, young people are exposed to it very early and there are good figures that show **the younger you're exposed to an addictive substance the more likely you are to develop an addiction**”



– Dr Tim Bevin  
Medical Officer, Community Mental Health and Addiction, Springhill;  
Medical Officer in Psychiatry,  
Hawke's Bay District Health Board

## Child-focused events – what is the evidence of harm?

“Children learn from watching us. If we keep alcohol away from events that include children and use it only for special occasions, they will be less likely to drink when young and less likely to become problem drinkers themselves.”



— Dr Russell Wills | Paediatrician, Hawke's Bay District Health Board; former Children's Commissioner

## MYTH

### “Drinking responsibly in front of children teaches them how to drink responsibly”



There is no evidence to suggest that drinking in front of children has positive benefits. In fact, research shows that children who witness adults drinking are more likely to start drinking at an earlier age and more unsafely.<sup>13</sup>



“Patterns of alcohol consumption in a population are determined by the level of regulation and what is considered acceptable”

– Prof Jennie Connor | Dunedin School of Medicine, University of Otago

## What works for reducing alcohol harm?

1. Reduce availability of alcohol
2. Reduce marketing of alcohol
3. Increase price of alcohol
4. Increase age of purchase of alcohol<sup>14</sup>

Although these are largely outside of a DHB’s control, Hawke’s Bay DHB has identified what can be done locally within its own Alcohol Harm Reduction Strategy.

The strategy’s key objectives are:

- reducing demand for alcohol by addressing the underlying drivers of alcohol use, and influencing societal attitudes towards alcohol (for example our drinking culture)
- influencing the supply of alcohol, by addressing the availability of alcohol and the exposure to alcohol in our everyday lives
- providing appropriate, accessible and timely services for those who need help with their drinking.



For more information visit: [ourhealthhb.nz](http://ourhealthhb.nz)

## Worried about your drinking?

If you or someone you know needs support and treatment to reduce their alcohol intake, free phone the Alcohol Drug Helpline on 0800 787 797, visit [alcoholdrughelp.org.nz](http://alcoholdrughelp.org.nz) or free text 8681. You can also talk to your doctor about your drinking, especially if you are pregnant and finding it difficult to stop drinking.



## References

- <sup>1</sup> NZ Health Survey 2015/16
- <sup>2</sup> Health and Independence Report, 2018
- <sup>3</sup> Health Promotion Agency
- <sup>4</sup> For period 1 August 2018- 31 July 2019, HBDHB Data Warehouse, 2019
- <sup>5</sup> NZ Health Survey 2015/16
- <sup>6</sup> The Australian Drug Harms Ranking Study, 2019  
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- <sup>12</sup> HBDHB Community Survey, 2016
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